



**Chandler • Arizona**  
Where Values Make The Difference

# Home Based Business/Occupation Zoning Clearance Application

Date		Business Name		Permit No.	
Applicant Name				Application Received Date Stamp & Initial	
Home Address		City, State, Zip Code			
Home Phone	Daytime Phone	E-mail address			
Describe in some detail the nature of the business & proposed use of your home (what will occur there?)					

For a Home Based Business/Occupation, you must agree to comply with the following items. Please read and initial each item, and sign your name below.

- \_\_\_\_\_ 1. **Only one (1) commercial vehicle may be kept at the home related to the home business.**
- \_\_\_\_\_ 2. **Any Home Business/Occupation must be:**
- a. Conducted entirely within the dwelling (cannot occur within a garage/carport or accessory building).
  - b. Carried on by a member of the family currently living there.
  - c. Clearly incidental and subordinate to the use of the home for dwelling purposes.
- \_\_\_\_\_ 3. **Any Home Business/Occupation must not:**
- a. Change the residential character of the neighborhood.
  - b. Have any employees, students, customers, etc. coming to the home other than immediate family living in the home. Only limited parcel and package deliveries are allowed.
  - c. Display any signs.
  - d. Have any outside storage, commercial equipment, displays, or any other outside activity at the home. (Equipment and materials must be stored off-site).
  - e. Require the use of mechanical equipment not normally used for hobby or household purposes.
  - f. Sell any commodity on the premises (that is, no retail/wholesale sales in the home).
  - g. Keep inventory of saleable commodities on the premises beyond the size of a small storage closet area.

I have read and understood the above listed items for a Home Based Business/Occupation. I certify that the Home Based Business/Occupation I propose will not violate any of the items listed above. I agree to conduct my Home Based Business/Occupation in accordance with the above listed items, and I understand that City Staff may perform periodic inspections to determine compliance. Upon approval of this zoning clearance form, the City's Site Development staff will notify the City's Tax & License Division of your business, as you will be required to apply for and be issued a City business license prior to operating your business.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<i>For City Use Only</i>		
<b>Zoning Checked By</b>	<b>Date</b>	<b>Approved: Yes No</b>
<b>Reason for denial and/or remarks</b>		

Mailing Address:  
P.O. Box 4008, MS 105  
Chandler, Arizona 85244-4008

**Transportation and Development Department**  
**Planning Division**  
**Site Development Section**  
**215 E. Buffalo St., Chandler Arizona**

Telephone: (480) 782-3000  
Fax: (480) 782-3075  
[www.chandleraz.gov](http://www.chandleraz.gov)  
Form No: UDM-035/Site Development  
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